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Terms	Documents
L5 and (424/450).ccls.	28

Database: US Pre-Grant Publication Full-Text Database; US Patents Full-Text Database; US OCR Full-Text Database; EPO Abstracts Database; JPO Abstracts Database; Derwent World Patents Index; IBM Technical Disclosure Bulletins

Search: L6

Refine Search | Recall Text | Clear | Interrupt

Search History

DATE: Tuesday, December 27, 2005 Printable Copy Create Case

Set Name side by side	Query	Hit Count	Set Name result set
DB=USPT,EPAB,JPAB,DWPI,TDBD; PLUR=YES; OP=OR			
L6	L5 and 424/450.ccls.	28	L6
L5	L4 and liposome	429	L5
L4	(vinca adj1 alkaloid) and (subcutaneous or intramuscular)	932	L4
L3	(vinca adj1 alkaloid) same (subcutaneous or intramuscular)	9	L3
L2	(vinka adj1 alkaloid) and (subcutaneous or intramuscular)	0	L2
L1	(vinka adj1 alkaloid) same (subcutaneous or intramuscular)	0	L1

END OF SEARCH HISTORY

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L3: Entry 4 of 9 File: USPT Apr 20, 2004

DOCUMENT-IDENTIFIER: US 6723338 B1
** See image for Certificate of Correction **
TITLE: Compositions and methods for treating lymphoma

Detailed Description Text (57):
Liposome-encapsulated vinca alkaloids can be administered in any of a number of ways, including parenteral, intravenous, systemic, local, intratumoral, intramuscular, subcutaneous, intraperitoneal, inhalation, or any such method of delivery. In preferred embodiments, the pharmaceutical compositions are administered Fintravenously by injection. In one embodiment, a patient is given an intravenous infusion of the liposome-encapsulated vinca alkaloids (single agent) through a running intravenous line over, e.g., 30 minutes, 60 minutes, 90 minutes, or longer. In preferred embodiments, a 60 minute infusion is used. Such infusions can be given periodically, e.g., once every 1, 3, 5, 7, 10, 14, 21, or 28 days or longer, preferably once every 7-21 days, and most preferably once every 14 days. As used herein, each administration of a liposomal vinca alkaloid is considered one "course" of treatment.

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L3: Entry 5 of 9 File: USPT Feb 10, 2004

DOCUMENT-IDENTIFIER: US 6689803 B2
TITLE: Compositions and methods for treating surgical adhesions

Detailed Description Text (33):
Utilizing the compositions provided above, inflammatory skin lesions may be readily treated. In particular, the anti-microtubule agent is administered directly to the site of inflammation (or a potential site of inflammation), in order to treat or prevent the disease. Suitable anti-microtubule agents are discussed in detail above, and include for example, taxanes (e.g., paclitaxel and docetaxel), campothecin, eleutherobin, sarcodictyins, epothilones A and B, discodermolide, deuterium oxide (D.sub.2 O), hexylene glycol(2-methyl-2,4-pentanediol), tubercidin (7-deazaadenosine), LY290181 (2-amino-4(3-pyridyl)-4H-naphtho(1,2-b)pyran-3-cardonitrile), aluminum fluoride, ethylene glycol bis-(succinimidylsuccinate), glycine ethyl ester, nocodazole, cytochalasin B, colchicine, colcemid, podophyllotoxin, benomyl, oryzalin, majusculamide C, demecolcine, methyl-2-benzimidazolecarbamate (MBC), LY195448, subtilisin, 1069C85, steganacin, combretastatin, curacin, estradiol, 2-methoxyestradiol, flavanol, rotenone, griseofulvin, vinca alkaloids, including vinblastine and vincristine, maytansinoids and ansamitocins, rhizoxin, phomopsin A, ustiloxins, dolastatin 10, dolastatin 15, halichondrins and halistatins, spongistatins, cryptophycins, rhazinilam, betaine, taurine, isethionate, HO-221, adociasulfate-2, estramustine, monoclonal anti-idiotypic antibodies, microtubule assembly promoting protein (taxol-like protein, TALP), cell swelling induced by hypotonic (190 mosmol/L) conditions, insulin (100 nmol/L) or glutamine (10 mmol/L), dynein binding, gibberelin, XCHO1 (kinesin-like protein), lysophosphatidic acid, lithium ion, plant cell wall components (e.g. poly-L-lysine and extensin), glycerol buffers, Triton X-100 microtubule stabilizing buffer, microtubule associated proteins (e.g., MAP2, MAP4, tau, big tau, ensconsin, elongation factor-1-alpha (EF-1.alpha.) and E-MAP-115), cellular entities (e.g., histone H1, myelin basic protein and kinetochores), endogenous microtubular structures (e.g. axonemal structures, plugs and GTP caps), stable tubule only polypeptide (e.g. STOP145 and STOP220) and tension from mitotic forces, as well as any analogues and derivatives of any of the above. Within certain embodiments, the anti-microtubule agent is an agent other than a paclitaxel, campothecin, or an epothilone. Such agents may, within certain embodiments, be delivered as a composition along with a polymeric carrier, or in a liposome, cream or ointment formulation as discussed in more detail both above and below. Within preferred embodiments of the invention, the agents or compositions are delivered either topically, or by subcutaneous administration.

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